

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Indian Health Service
Rockville, Maryland 20857

Refer to: OD

INDIAN HEALTH SERVICE-CIRCULAR NO. 97-06

CHARTER
NATIONAL COUNCIL OF CLINICAL DIRECTORS
OF THE INDIAN HEALTH SERVICE

Sec.

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1. PURPOSE. The National Council of Clinical Directors (NCCD) continually improves the health status of the American Indian and Alaska Native (AI/AN) people by responsibly and effectively participating in the development and implementation of the Indian Health Service (IHS) health care policies;
2. RESPONSIBILITIES The work of the NCCD falls into four **basic functions**.
 - A. Defines and develops the role of Clinical Directors at IHS and tribal and urban health programs. **Supports and advocates for the proper training and career development of Clinical Directors.**
 - B. Represents the field clinical concerns of the Indian health programs and serves as a conduit to the Indian Health Leadership Council (the Council):
 - (1) Initiates proposals for health care strategies and **policies.**

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- (2) Participates actively in policy development, review, and implementation.
 - (3) Participates in agency strategic planning.
 - (4) Shares information among NCCD members.
 - C. Provides a national forum for AI/AN health care issues.
 - D. Advocates for patient care quality improvement activities at the Service Units, Area offices, and Headquarters levels.
3. MEMBERSHIP AND OFFICERS The NCCD is a permanent council of the IHS. The NCCD is composed of all designated Clinical Directors at the IHS, urban, and tribal health programs.
- The officers of the NCCD shall be a Chair, Vice-Chair, and Secretary who are elected annually from among the members of the Executive Committee of the NCCD. The Chair presides at meetings of the NCCD and coordinates the NCCD annual meeting. In the absence of the elected Chair, the Vice-Chair performs the duties of the Chair. The Vice-Chair is also NCCD Chair-Elect for the following year. The Secretary takes minutes of each, NCCD meeting and conference call and stores and safeguards copies of the Charter, meeting and conference call minutes, resolutions, records of award recipients, and other NCCD documents.
4. EXECUTIVE COMMITTEE There shall be one standing committee of the NCCD entitled the Executive Committee. It will be composed of one Clinical Director from each IHS Area, who is selected by the Clinical Directors within their Area. In addition, there will be one voting urban health program Clinical Director representative elected by the Clinical Directors of the urban health programs. The terms of Executive Committee members shall be for two years, without restriction on the number of terms. The Chair, Vice-Chair, and Secretary of the NCCD are elected annually by the Executive Committee and also serve as officers of the Executive Committee.
5. RELATIONSHIPS;
- A. The NCCD Chair is a member of the Executive Leadership Group (ELG) of the Council.

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- B. The NCCD coordinates and communicates with the Council of Chief Medical Officers (CCMO), the IHS Chief Medical Officer, and the Executive Committee of the National Council of Service Unit Directors (NCSUD) on program issues, action items, or policy of mutual concern. At least one NCCD Executive Committee meeting each year will be held concurrent with a meeting of the CCMO and the Executive Committee of the NCSUD.

6. **AUTHORITIES.** The NCCD shall carry out such responsibilities and authorities as are provided in this Charter, as well as those delegated to the NCCD in writing by the Chair of the Council.

7. **MEETINGS, STAFF SUPPORT, AND BUDGET** The NCCD meets annually with its general membership at a time and place determined by the Executive Committee and approved by the IHS CMO. The annual meeting of the NCCD, which is concurrent with a meeting of the CCMO, may be held in combination with the annual general meeting of the NCSUD.

The Executive Committee of the NCCD is authorized to meet a minimum of two times each year. Areas will cover the costs incurred by Executive Committee members to attend the Executive Committee meetings and to attend the annual NCCD meeting. Funding to cover the expenses incurred by the urban health program representative to attend Executive Committee meetings will be provided by the IHS Headquarters Urban Indian Health Program. The urban program that employs this representative will reimburse the Urban Indian Health Program.

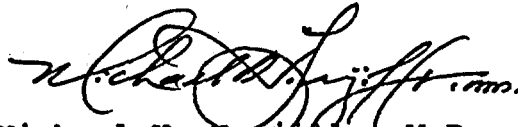
The annual meeting of the NCCD is held concurrent with a meeting of the CCMO, and may be held in combination with the annual general meeting of the NCSUD. Conference calls may be used between meetings and will be funded by the Area office of the Vice-Chair. The expenses incurred by NCCD members to attend the annual meeting shall be paid by the Service Unit where the NCCD member is employed.

Member(s) of the Executive Committee attend meetings of the Council, the ELG, the CCMO, the NCSUD, and other meetings as requested. The expenses incurred by NCCD members to attend these meetings shall be paid by the Service Unit where the NCCD member is employed.

The Clinical Support Center provides logistical support for the NCCD annual meeting and for the NCCD Executive Committee.

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8. AD HOC COMMITTEE The Chair of the NCCD may appoint ad hoc committees as necessary.
9. REPORT. The Chair of the NCCD is responsible for assigning and coordinating the drafting of reports, position statements, and position papers of the NCCD, and to present a report at quarterly meetings of the Council upon request.
10. AMENDMENTS TO THIS CHARTER This Charter may be amended by majority vote of Clinical Directors attending the general session of Clinical Directors at the annual NCCD meeting and by processing through the Director, Management Policy Support Staff, Office of Management Support, consistent with the process for development, clearance, and distribution of IHS directives.
11. SUPERSEDURE. This circular supersedes IHS Circular No. 92-13, "Charter, National Council of Clinical Directors," dated September 4, 1992, in its entirety.
- 12; EFFECTIVE DATE This circular is effective upon the date of signature by the Director, IHS.



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